May 16, 2008

Dept. of Health and Human Services **Attention:** Jonathan Tapley
Division of CLTC – Waiver Management
1801 Main Street
Post Office Box 8206
Columbia, SC 29202-8206

Dear Mr. Tapley:

Enclosed is a copy of a pre-enrollment information packet for Scott Braud who is approved through the process to provide Early Intensive Behavioral Intervention services under the SC Department of Disabilities and Special Needs (DDSN) Pervasive Developmental Disorder Waiver.

Please process Mr. Braud's paperwork for enrollment so that he is given a provider number for the Medicaid Waiver. Please copy my office to inform DDSN when this process is completed by DHHS and of his provider number so that we may add his name and number to the list of approved providers. As always, thank you for your prompt attention and assistance in this matter.

Sincerely,

Daniel Davis.
Director, Autism Division

**Enclosures** 

PDD L 3 June 6, 2008